Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILED - PART I |   |   |                               |                      |                              |  |            | SMALL EN            | <u>ITI</u> TY          | OTHER THAN |   |                        |
|--------------------------|---|---|-------------------------------|----------------------|------------------------------|--|------------|---------------------|------------------------|------------|---|------------------------|
|                          |   |   | (Column                       | 1)                   | (Colu                        | nn 2)  | 1          | TYPE                | <b>_</b>               | OR         | SMALL                                   | ENTITY                 |
| TO                       | TAL CLAIMS                              |   |                               |                      |                              |  |            | RATE                | FEE                    |            | RATE                                    | FEE                    |
| FO                       | 3                                       |   | NUMBER F                      | ILED                 | NUMBI                        | ER EXTRA                                     |            | BASIC FEE           | 370.00                 | OR         | BASIC FEE                               | 740.00                 |
| TO.                      | TAL CHARGEAB                            | ILE CLAIMS                                | mini                          | ıs 20=               | *                            |  |            | X\$ 9=              |                        | OR         | X\$18=                                  |                        |
| IND                      | EPENDENT CLA                            | NIMS                                      | min                           | us 3 =               | *                            |  |            | X42=                | <u>-</u>               | OR         | X84=                                    |                        |
| MU                       | LTIPLE DEPEND                           | DENT CLAIM PI                             | RESENT                        |                      |                              |  |            | +140=               |                        | OR         | +280=                                   |                        |
| * If                     | the difference i                        | n column 1 is                             | less than ze                  | ro, ente             | r "0" in c                   | olumn 2                                      | 1          | TOTAL               |                        | OR         | TOTAL                                   |                        |
|                          | CL                                      | AIMS AS A                                 | MENDED                        | - PAR                | IT II                        |  |            |                     |                        |            | OTHER                                   |                        |
|                          |   | (Column 1)                                |                               |                      | mn 2)                        | (Column 3)                                   |            | SMALL               |                        | OR         | SMALL                                   |                        |
| AMENDMENT A              |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                               | NUM<br>PREVI         | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                             |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                                    | ADDI-<br>TIONAL<br>FEE |
| MON                      | Total                                   | * 12                                      | Minus                         | **2                  | <u>0</u>                     | =  |            | X\$ 9=              |                        | OR         | X\$18=                                  |                        |
| AME                      | Independent                             | * 2                                       | Minus                         | ***                  | 3                            | =  |            | X42=                | -                      | OR         | X84==                                   |                        |
| Ľ_                       | FIRST PRESENTATION OF MULTIPLE DEPEND   |   | CNUEN                         | CLAIM                | اببا                         | į  | +140=      |                     | OR                     | +280=      |   |                        |
|                          | •                                       |   |                               |                      |                              |  | 1          | TOTAL               |                        | OR         | TOTAL<br>ADDIT. FEE                     | , . <del></del>        |
|                          |   |   |                               | /O-!                 | O\                           | (Column a)                                   |            | ADDIT. FEE          |                        |            | ADDII. PEEI                             | <u> </u>               |
| _                        | <u> </u>                                | (Column 1)<br>CLAIMS                      | أريبك فريف ويستسوأه بشداء يسا |                      | ımn 2)<br>HEST               | (Column 3)                                   | ו ד        |                     | ADDI-                  |            |   | ADDI-                  |
| ENT B                    |   | REMAINING<br>AFTER<br>AMENDMENT           |                               | NUM<br>PREV          | MBER<br>IOUSLY<br>D FOR      | PRESENT<br>EXTRA                             |            | RATE                | TIONAL<br>FEE          |            | RATE                                    | TIONAL<br>FEE          |
| MON                      | Total                                   | *   | Minus                         | **                   |                              | =  | 1          | X\$ 9=              |                        | OR         | X\$18=                                  |                        |
| AMENDMENT                | Independent                             | *   | Minus                         | ***                  | IT CL AIR4                   | =<br>  -                                     | 4          | X42=                |                        | OR         | X84=                                    |                        |
|                          | FIRST PRESE                             | NTATION OF M                              | ULTIPLE DEF                   | ENDEN                | - CLAIM                      |  |            | +140=               |                        | OR         | +280=                                   |                        |
|                          |   |   |                               |                      |                              |  |            | TOTAL<br>ADDIT. FEE |                        | OR         | TOTAL<br>ADDIT. FEE                     |                        |
|                          |   | (Column 1)                                |                               | (Coli                | ımn 2)                       | (Column 3)                                   |            | AUUII. FEE I        |                        | -          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| ر<br>۲ د                 |   | CLAIMS<br>REMAINING<br>AFTER              |                               | HIG<br>NUI           | HEST<br>MBER<br>YOUSLY       | PRESENT<br>EXTRA                             |            | RATE                | ADDI-<br>TIONAL        |            | RATE                                    | -IDCA<br>TIANOIT       |
| ÎEN                      |   | AMENDMENT                                 |                               | PAII                 | O FOR                        | <del> </del>                                 | 1          |                     | FEE                    |            |   | FEE                    |
| AMENDMENT C              | Total                                   | *   | Minus                         | **                   |                              | =  | -          | X\$ 9=              |                        | OR         | X\$18=                                  |                        |
| AME                      | Independent                             | *<br>NTATION OF N                         | Minus                         | PENDEN               | AT CLAIM                     | <u>                                     </u> | -          | X42=                |                        | OR         | X84=                                    |                        |
| ╟                        | FIRST PRESE                             | MIAHUN UF N                               | TOLITE DE                     | CINDEL               | VI CLARV                     | <u>'                                    </u> | L          | +140=               |                        | OR         | +280=                                   |                        |
|                          | If the entry in colu                    | mn 1 is less than                         | the entry in colu             | ımn 2, wr            | ite "0" in c                 | olumn 3.                                     | <b>.</b> " | TOTAL               |                        | OR         | TOTAL                                   |                        |
| **                       | If the "Highest Nu                      | mber Previously I                         | Paid For" IN TH               | IS SPACE<br>IS SPACE | is less the                  | an 20, enter "20<br>an 3-enter "3."          |            | ADDIT. FEE          | <u> </u>               |            | ADDIT. FEE                              | L                      |
| l                        | if the "Highest Nun<br>The "Highest Nun | nber Previously P                         | aid For" (Total c             | r Indeper            | ndent) is th                 | e highest numb                               | er fo      | ound in the ap      | propriate bo           | x in co    | lumn 1.                                 |                        |

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

09/900054

| CLAIMS AS FILED - PART (Column 1)   |   |   |                      |                               |                     | mn 2)            |       | SMALL E             | NTITY                  | OR                  | OTHER THAN SMALL ENTITY |                        |
|---|---|---|----------------------|-------------------------------|---------------------|------------------|-------|---------------------|------------------------|---------------------|-------------------------|------------------------|
| TC  | TAL CLAIMS  |   |                      |                               |                     |                  |       | RATE                | FEE                    | 7                   | RATE                    | ·FEE                   |
| FO  | R   |   | NUMBER FILED         |                               | NUMBER EXTRA        |                  |       | BASIC FEE           | \$375                  | OR                  | BASIC FEE               | <b>\$</b> 750          |
| то  | TAL CHARGEA   | BLE CLAIMS                                | min                  | us 20=                        | *                   |                  |       | X\$ 9=              |                        | OR                  | X\$18=                  | ,                      |
| IND   | EPENDENT CL   | AIMS                                      | mii                  | nus 3 =                       | *                   |                  |       | X42=                |                        | OR                  | X84=                    |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |                      |                               |                     |                  |       | +140=               |                        | OR                  | +280=                   | _                      |
| * If  | the difference  | in column 1 is                            | less than ze         | ro, enter                     | "0" in c            | olumn 2          |       | TOTAL               |                        | OR                  | TOTAL                   |                        |
|   | C   | LAIMS AS A                                | MENDED               | - PAR                         | T II                | •                |       |                     | <del>*</del>           | _                   | OTHER                   |                        |
|   | Talka set to the set a  | (Column 1)                                | n e specifye e i i i | (Colur                        |                     | (Column 3)       | 1 1   | SMALL               | ENTITY                 | OR                  | SMALL                   | ENTITY                 |
| ENT   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | NUM<br>PREVIC<br>PAID         | BER<br>DUSLY        | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                    | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total   | . 17                                      | Minus                | ** 9                          | )                   | =                |       | X\$ 9=              |                        | OR                  | X\$18=                  |                        |
| AME   | Independent   | . 2                                       | Minus                | ***                           | 3                   | =                |       | X42=                |                        | OR                  | X84=                    |                        |
| L.  | FIRST PRESENTATION OF MULTIPLE DEPENDENT  |   |                      | CLAIM                         |                     |                  | +140= |                     | OR                     | +280=               |                         |                        |
|   |   |   |                      |                               |                     |                  | TOTAL | •                   |                        | TOTAL<br>ADDIT, FEE |                         |                        |
|   |   | (Column 1)                                |                      | (Colur                        | mn 2)               | (Column 3)       |       | ADDIT. FEE          | <del></del>            | ,                   | ADDII. FEE              |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                    | ADDI-<br>TIONAL<br>FEE |
| MON   | Total   | *   | Minus                | **                            |                     | =                |       | X\$ 9=              |                        | OR                  | X\$18=                  |                        |
| AME   | Independent   | *   | Minus                | ***                           |                     | =                |       | X42=                |                        | OR                  | X84=                    |                        |
| L   | FIRST PRESE   | NTATION OF MU                             | JUIPLE DEF           | ENDENI                        | CLAIM               |                  | 1     | +140=               |                        | OR                  | +280=                   |                        |
|   |   |   |                      |                               |                     |                  |       | TOTAL<br>ADDIT. FEE |                        | OR                  | TOTAL<br>ADDIT, FEE     |                        |
|   |   | (Column 1)                                | ,                    | (Colur                        | nn 2)               | (Column 3)       | _     |                     |                        |                     |                         |                        |
| AMENDMENTC  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |                     | RATE                    | ADDI-<br>TIONAL<br>FEE |
| NDM   | Total   | *   | Minus                | **                            |                     | =                |       | X\$ 9=              |                        | OR                  | X\$18=                  | ,                      |
| AME   | Independent   | *   | Minus                | ***                           |                     | =                |       | X42=                |                        | OR                  | X84=                    |                        |
|   | FIRST PRESE   | NTATION OF MI                             | JLTIPLE DEF          | PENDENT                       | CLAIM               |                  | ]     | +140=               |                        | 1                   | +280=                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |                      |                               |                     |                  |       |                     |                        |                     |                         |                        |
| ***   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                      |                               |                     |                  |       |                     |                        |                     |                         |                        |

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Numb er

08/900054

| CLAIMS AS FILED - PART I |                    |   |  |                                   |                  |                              |          | SMALL           | ENTITY                                |                   | OTHE                                   | OTHER THAN             |  |
|--------------------------|--------------------|---|--|-----------------------------------|------------------|------------------------------|----------|-----------------|---------------------------------------|-------------------|--|------------------------|--|
| F-                       | OTAL CLAIM         | 2   | (Colum   | nn 1)                             | (Coli            | umn 2)                       |          | TYPE            |                                       | OF                |  | LEINTITY               |  |
| -                        |                    | ى<br>   |  |                                   |                  |                              |          | RATE            | FEE                                   |                   | RATE                                   | FEE                    |  |
| FOR                      |                    |   | NUMBE  | RFILED                            | MUM              | BER EXTRA                    |          | BASIC FE        | SE \$375                              | OF                | BASIC FE                               | <b>\$</b> 750          |  |
| Ţ                        | OTAL CHARGE        | EABLE CLAIMS  | m  | minus 20= *                       |                  |                              |          | X\$ 9=          |                                       | OF                | X\$18=                                 |                        |  |
| ĺΝ                       | DEPENDENT (        | CLAIMS  | n  | ninus 3 =                         | *                |                              |          | X42=            | <del> </del>                          | -                 | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 1                      |  |
| М                        | ULTIPLE DEPE       | ENDENT CLAIM P  | PRESENT  | ,                                 |                  |                              | <b> </b> | 4.40            |                                       | OR                | `                                      | <del> </del>           |  |
| * [                      | f the differenc    | e in column 1 is  | less than z  | ero, enter                        | "0" in d         | column 2                     | Ł        | +140=           | ļ <u>.</u>                            | AO                | L                                      |                        |  |
|                          |                    | CLAIMS AS A   |  |                                   |                  |                              |          | TOTAL           |                                       | OR                |  | L                      |  |
|                          | <b>\</b>           | (Column 1)  | AMENDE   | Colum)                            |                  | (Column 3)                   |          | SMALL           | ENTITY                                | OR                |  | NAHT F<br>ENTITY       |  |
| AMENDMENT A              |                    | CLAIMS REMAINING AFTER AMENDMENT  |  | HIGHE<br>NUMB<br>PREVIO<br>PAID F | ST<br>ER<br>USLY | PRESENT<br>EXTRA             |          | RATE            | ADDI-<br>TIONAL<br>FEE                |                   | RATE                                   | ADDI-<br>TIONAL<br>FEE |  |
| NDN                      | Total              | . 12  | Minus  | ** 2                              | 20               | = /                          |          | X\$ 9=          |                                       | OR                | X\$18=                                 | 7                      |  |
| AME                      | Independent        | 1.3   | Miņus  | · · · · 3                         | 3                | =                            |          | X42=            | /                                     | OR                | X84=                                   | <u> </u>               |  |
| FIRST PRESENTATION OF MU |                    |   | ULTIPLE DE   | PENDENT                           | CLAIM            |                              | T        | +140=           | <u> </u>                              | 1                 | +280=                                  |                        |  |
|                          |                    |   |  |                                   |                  |                              | L        | TOTAL           |                                       | OR                | TOTAL                                  | ļ                      |  |
|                          |                    | (Column 1)  |  | (Colum                            | n 21             | (Column 3)                   | Α(       | DDIT, FEE       |                                       | JOR               | ADDIT FEE                              | l                      |  |
| m                        |                    | CLAIMS  |  | HIGHE                             | ST               |                              | Г        |                 | ADDI-                                 | 7 1               | <del></del>                            | ADDI-                  |  |
| AMENDMEN! B              |                    | REMAINING<br>AFTER<br>AMENDMENT   |  | NUMBE<br>PREVIOU<br>PAID FO       | JSLY             | PRESENT<br>EXTRA             |          | RATE            | TIONAL<br>FEE                         |                   | RATE                                   | TIONAL<br>FEE          |  |
| NON                      | Total              | +   | Minus  | **                                |                  | =                            |          | X\$ 9=          |                                       | OR                | X\$18=                                 |                        |  |
| A ME                     | Independent        | *   | Minus  | ***                               |                  | = '                          |          | X42=            |                                       | OR                | X84=                                   |                        |  |
|                          | FIRST PRESE        | NTATION OF MU   | ILTIPLE DEF  | PENDENT C                         | CLAIM            |                              | <u> </u> | . 1.40          | · · · · · · · · · · · · · · · · · · · | 1 1               |  |                        |  |
|                          |                    |   |  |                                   |                  |                              | L        | +140=<br>TOTAL  |                                       | OR                | +280=<br>TOTAL                         | ·                      |  |
|                          |                    |   |  |                                   |                  |                              | ΑD       | DIT. FEE        |                                       | OR A              | TOTAL<br>ADDIT. FEE                    |                        |  |
|                          |                    | (Column 1)<br>CLAIMS  | rost treating  | (Column<br>HIGHES                 |                  | (Column 3)                   | ,        |                 | <del></del>                           | _                 |  |                        |  |
| 2                        |                    | REMAINING<br>AFTER<br>AMENDMENT   |  | NUMBE<br>PREVIOU<br>PAID FO       | R<br>SLY         | PRESENT<br>EXTRA             | ,        | RATE            | ADDI-<br>TIONAL<br>FEE                |                   | RATE                                   | ADDI-<br>TIONAL<br>FEE |  |
|                          | Total              |   | Minus  | * *                               |                  | <u> </u>                     | ;        | X\$ 9=          |                                       | OR                | X\$18=                                 |                        |  |
| r H-                     | Independent        | <u> </u>  | Minus  | + 4-4                             |                  | =                            |          | X42=            |                                       | }-                | <br>∑84=                               |                        |  |
|                          | FIRST PRESE        | NTATION OF MU   | LTIPLE DEP   | ENDENT C                          | LAJIA            |                              | -        | -               |                                       | OR                | 7 57                                   |                        |  |
| · If                     | the entry in color | nn 1 is less than the   | sento so estr-   | nn a water to                     | " .o. cole::     | rmo 3                        |          | 140≡            |                                       | OR L              | +28J≞                                  |                        |  |
| • 1f                     | the "mytost tro    | on it is tess than the<br>title fine out it fact<br>ober Previously Pac | 1 . The  | CRACE                             | 55 C.ah          | 20 enter 10.                 | ADE      | TOTAL<br>AT FEE |                                       | ું <sup>દ</sup> - | TOTAL<br>SUI FEE                       |                        |  |
| Ti                       | ne "Highest Num    | nder Previously Pad<br>ber Freunusly Paid                               | a nor i i i i i i i i i i i i i i i<br>Por" i Total or | , or Hut is le<br>Inder ender t   | is the h         | a, emer a<br>rahest rumber f | cand     | in the ar so    | oposte brik                           | g in dign         | na t                                   |                        |  |
|                          |                    |   |  |                                   |                  |                              |          |                 |                                       |                   |  | f                      |  |

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| Application or Docket Number | •••• |
|------------------------------|------|
| 09900055                     | L    |

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |   |                   |                                 |              |                  |          | SMALL EN            | ITITY                  | OR | OTHER THAN<br>OR SMALL ENTITY           |                        |         |  |
|--|--|---|-------------------|---------------------------------|--------------|------------------|----------|---------------------|------------------------|----|---|------------------------|---------|--|
| TC   | TAL CLAIMS   |   | 12                |                                 |              | Valence i L      |          | RATE                | FEE                    |    | RATE                                    | FEE                    |         |  |
| FO   | R  |   | NUMBER F          |                                 |              | R EXTRA          |          | BASIC FEE           | 355.00                 | OR | BASIC FEE                               | 710.00                 |         |  |
| то   | TAL CHARGEA  | BLE CLAIMS                                | 12 minu           | ıs 20= * <i>O</i>               |              |                  |          | X\$ 9=              |                        | OR | X\$18=                                  |                        |         |  |
| IND  | EPENDENT CL  | AIMS                                      | 2 min             | us 3 =                          | · 0          |                  |          | X40=                |                        | OR | X80=                                    | -                      |         |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                   |                                 |              |                  |          | +135=               |                        | OR | +270=                                   | _                      |         |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                   |                                 |              |                  |          | TOTAL               |                        | OR | TOTAL                                   | 110                    |         |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)             |  |   |                   |                                 |              |                  |          | SMALL               | ENTITY                 | OR | OTHER<br>SMALL                          |                        |         |  |
| ENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ******            | HIGHI<br>NUME<br>PREVIC<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |         |  |
| AMENDMENT  | Total  | *   | Minus             | **                              |              | =                |          | X\$ 9=              |                        | OR | X\$18=                                  |                        | - 37/52 |  |
|  | Independent  | *   | Minus             | ***                             |              | =                |          | X40=                |                        | OR | X80=                                    |                        |         |  |
| L  | FIRST PRESE  | NTATION OF M                              | IULTIPLE DEF      | PENDENT                         | CLAIM        |                  | ļ        | +135=               |                        | OR | +270=                                   |                        |         |  |
|  |  |   |                   |                                 |              |                  |          | TOTAL               |                        | OR | TOTAL<br>ADDIT. FEE                     |                        |         |  |
|  |  | (Column 1)                                |                   | (Colur                          | mn 2)        | (Column 3)       | )        | ADDIT. FEE          |                        | •  | , |                        | 1       |  |
| ENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVIO<br>PAID   | BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |         |  |
| P<br>N   | Total  | *   | Minus             | **                              |              |                  |          | X\$ 9=              |                        | OR | X\$18=                                  | Ī                      |         |  |
| AMENDMENT  | Independent  | *   | Minus             | ***                             |              | -                |          | X40=                |                        | OR | X80=                                    |                        |         |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                   |                                 |              |                  |          | +135=               |                        | OR | +270=                                   |                        |         |  |
|  |  |   |                   |                                 |              |                  |          | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE                     |                        |         |  |
|  |  | (Column 1)                                |                   | (Colu                           | mn <u>2)</u> | (Column 3)       | <u>)</u> | ADDIT. PEL          |                        | •  | ADDIT: I EL                             |                        | ] .     |  |
| FNT C  |  | CLAIMS REMAINING AFTER AMENDMENT          |                   | 1                               |              | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |         |  |
| AMENDMENT  | Total  | *   | Minus             | **                              |              | =                |          | X\$ 9=              |                        | OR | X\$18=                                  |                        |         |  |
| WE!  | Independent  | *   | Minus             | ***                             |              | <u> -</u>        | _[       | X40=                |                        | OR | X80=                                    |                        |         |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                   |                                 |              |                  |          | +135=               |                        | OR | +270=                                   | <u> </u>               | 1       |  |
|  | If the entry in col  | umn 1 is less than                        | the entry in colu | umn 2, writ                     | e "0" in co  | olumn 3.         | o "      | TOTAL               | <b> </b>               | ┨  | TOTAL                                   |                        | -       |  |
| :  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                   |                                 |              |                  |          |                     |                        |    |   |                        |         |  |